

Present/Past Performance Questionnaire (Housing Privatization)

(This information, when filled in, shall be treated as Source Selection Information and shall not be disclosed to anyone outside the Government Source Selection Evaluation Team.)

Contractor: ☐ Prime? ☐ Sub?

Project/Program Title:

Contract Number:

Contract Types - List all that apply (i.e., FFP, T&M, Cost, etc.)

■ Description of Your Project/Program (Please include magnitude & level of complexity as compared to ours below■):

PERIOD OF PERFORMANCE:

1. Original Schedule:

2. Current Schedule:

3. How many times changed:

4. Primary causes of changes:

PROJECT \$ VALUE:

1. Original Project \$ Value:

2. Current Project \$ Value:

3. Estimate @ Completion:

4. How many times changed:

5. Primary causes of changes:

PART I: PLEASE TELL US HOW RELEVANT YOUR PROGRAM IS TO OURS, BASED ON THE FOLLOWING REQUIREMENTS:

RATING SCALE: NR=NOT RELEVANT S=SEMI-RELEVANT R=RELEVANT VR=VERY RELEVANT

■ OUR REQUIREMENTS

1. Complete demolition of 366 housing units (2/3/4 bedroom) within 2 years.
2. Complete renovation of 300 housing units (2/3/4/ bedroom) within 8 years.
3. A & E design/construction of 300 new housing units (2/3/4/ bedroom) within 8 years.
4. Full residential property management responsibility for 30 years.
5. Provide safe/secure living environment for housing residents
6. Effort requires community master planning.
7. Effort requires privatization of government-owned facilities/land.

NR	S	R	VR

NOTE! The relevancy ratings above reflect the subjective opinion of the questionnaire respondents; and, shall not be construed as the sole or final judgement of relevancy made by the Housing Privatization Evaluation Team.

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PART II: PLEASE CHECK THE APPROPRIATE RATING FOR EACH OF THE FOLLOWING QUESTIONS:

N/A=NOT APPLICABLE P=POOR B=BELOW AVERAGE G=GOOD V=VERY GOOD E=EXCELLENT
 For any rating of "N/A", "Poor" or "Below Average" please provide supporting comments in "Additional remarks."

N/A	P	B	G	V	E
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TECHNICAL:

1. Extent To Which General Design Specs Were Met
2. Extent To Which Detailed Design Specs Were Met
3. Customer Satisfaction With Tech Data & Design Submittals
4. Performance Of DEMOLITION Efforts
5. Performance Of RENOVATION Efforts.
6. Performance Of CONSTRUCTION Efforts.
7. Performance Of HAZARDOUS WASTE MGMT Efforts.

MANAGEMENT:

8. Adequate/Complete Management Plan
9. Dedicated Resources
10. Teaming Arrangement/Subcontract Mgmt/Surveillance
11. Overall Management Performance

DELIVERY/TIMELINESS:

12. All Requirements Completed On-Time
13. Monitoring of Program Schedule and Critical Milestones
14. Completed Reports on Time

QUALITY:

15. Delivered Quality Supplies/Services/Satisfied the Customer
16. Level of Quality Remained Consistent

COST CONTROL:

17. Ability to manage program costs
18. Value of Product (Considering Price Paid)
19. Contractor's Financial Stability During Project Performance
20. Contractor's Effectiveness In Reducing Project Costs

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PART II (Cont'd): PLEASE CHECK THE APPROPRIATE RATING FOR EACH OF THE FOLLOWING QUESTIONS:

N/A=NOT APPLICABLE P=POOR B=BELOW AVERAGE G=GOOD V=VERY GOOD E=EXCELLENT

For any rating of "N/A", "Poor" or "Below Average" please provide supporting comments in "Additional remarks."

N/A	P	B	G	V	E
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SECURITY PLAN:

- 21. Adequacy of Resource Protection
- 22. Extent To Which Detailed Intent Of Security Design Specs Were Met.
- 23. Reliability/Maintainability Of Security System
- 24. Type of Security Utilized (Please Describe In ADDITIONAL REMARKS.)
- 25. Was Security Plan Successful? (Please Describe In ADDITIONAL REMARKS.)
- 26. What Improvements Would You Make, If Possible? (Please Describe In ADDITIONAL REMARKS.)

COMMUNITY MASTER DEVELOPMENT PLAN:

- 27. Extent To Which Intent Of Design Specs Were Met.
- 28. Maintainability Of Development (Met Reqmnts & Satisfied Customer)
- 29. Satisfaction With Warranty Responses And Corrective Actions

FACILITY/DESIGN CONSTRUCTION:

- 30. Extent To Which Intent Of Design Specs Were Met.
- 31. Reliability Of Design (Met Reqmnts & Satisfied Customer)
- 32. Maintainability Of Design (Met Reqmnts & Satisfied Customer)
- 33. Satisfaction With Warranty Responses And Corrective Actions.

REAL ESTATE PROPERTY MANAGEMENT:

- 34. Extent To Which Intent Of Property Mgmt Plan Was Met.
- 35. Overall Customer Satisfaction.
- 36. Reliability Of Customer Service.
- 37 Timely/Courteous Response To Customer Complaints.
- 38. Change Of Occupancy Maintenance Downtime Management
- 39. Quality Of Change Of Occupancy Maintenance

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PART III: PLEASE RESPOND "YES" OR "NO", AS APPROPRIATE, FOR EACH OF THE FOLLOWING QUESTIONS:

FINANCIAL STRATEGY:

40. Was the Financial Plan Adhered To? Yes: No: N/A:

If No, Please Reference & Explain In ADDITIONAL REMARKS.

41. Were Any Changes Made To Financial Strategy/Plan? Yes: No: N/A:

If Yes, Please Reference & Describe Change/Effects In ADDITIONAL REMARKS.

42. Were There Any Cost Overruns Involved With The Project? Yes: No: N/A:

If Yes, Please Reference & Indicate Impact/Disposition In ADDITIONAL REMARKS.

43. Weaknesses/Strengths of Financial Strategy (Please Describe): _____

PROFORMA FINANCIAL INFORMATION:

44. Were The Underlying Assumptions Sound? Yes: No: N/A:

If No, Please Reference & Explain In ADDITIONAL REMARKS.

45. Were The Proforma Financial Objectives Met? Yes: No: N/A:

If No, Please Reference & Explain In ADDITIONAL REMARKS.

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PART III (Cont'd): PLEASE RESPOND "YES" OR "NO", AS APPROPRIATE, FOR EACH OF THE FOLLOWING QUESTIONS:

CUSTOMER PARTICIPATION IN PROJECT FINANCING:

46. What Type of Financing Was Used? (Please Describe Constrction and/or Permanent, Bond or Mortgage):_____

47. Was The Financing Obtained In A Timely Manner?	Yes:	No:	N/A:
If No, Please Reference & Explain In ADDITIONAL REMARKS.			

ACCOUNT MANAGEMENT:

48. Were There Any Instances Where Subcontractors Were Not Paid?	Yes:	No:	N/A:
If Yes, Please Reference & Explain In ADDITIONAL REMARKS.			

49. Were Any Liens Placed Against The Project?	Yes:	No:	N/A:
If Yes, Please Reference & Explain In ADDITIONAL REMARKS.			

EXIT STRATEGY:

50. Did This Project Require Some Type Of Exit Strategy?	Yes:	No:	N/A:
If Yes, Please Reference & Explain In ADDITIONAL REMARKS.			

51. If 67 Is "Yes", Was It Reasonable?	Yes:	No:	N/A:
If No, Please Reference & Explain In ADDITIONAL REMARKS.			

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PART III (Cont'd): PLEASE RESPOND "YES" OR "NO", AS APPROPRIATE, FOR EACH OF THE FOLLOWING QUESTIONS:

GENERAL AREAS:

- | | | | |
|---|-------------|------------|-------------|
| 52. To Your Knowledge, Has This Contractor Filed For Bankruptcy In The Past 10 Years?
If Yes, Please Reference & Indicate Date, Type & Disposition In ADDITIONAL REMARKS. | Yes: | No: | N/A: |
| 53. To Your Knowledge, Have Any Key Personnel Associated With This Contractor Been Indicted For Embezzlement Within The Past 10 Years?
If Yes, Please Reference & Indicate Name, Date, And Disposition In ADDITIONAL REMARKS. | Yes: | No: | N/A: |
| 54. To Your Knowledge, Has This Contractor's Credit Line Been Increased/Decreased By 25% Or More Within The Last 10 Years?
If Yes, Please Reference & Indicate Date And Reason For Change In ADDITIONAL REMARKS. | Yes: | No: | N/A: |
| 55. To Your Knowledge, Has This Contractor Had A Contract Cancelled Or Terminated For Default?
If Yes, Please Reference & Explain In ADDITIONAL REMARKS. | Yes: | No: | N/A: |
| 56. Have There Been Any Disputes/Claims Relative To This Project?
If Yes, Please Reference & Explain In ADDITIONAL REMARKS. | Yes: | No: | N/A: |
| 57. Has This Contractor Demonstrated Capability To Work Independently And Without Significant Customer Direction/Oversight?
If No, Please Reference & Explain In ADDITIONAL REMARKS. | Yes: | No: | N/A: |
| 58. Given A Choice, Would You Use This Contractor Again?
If No, Please Reference & Explain In ADDITIONAL REMARKS. | Yes: | No: | N/A: |

Request for Proposals

Solicitation Number F09650-90-R-0207
West Robins Housing Privatization Project, UHHZ 974012

APPENDIX V-2: CLIENT AUTHORIZATION FORM LETTER

NOTE TO OFFERORS: *To assist the Government's Performance Risk Assessment Group (PRAG) in assessing your qualifications/past performance on relevant commercial contracts, the following letter must be sent to points of contact (POC's) for those commercial efforts that you identify to us in your volume 4 submittal. Should you propose to use critical subcontractors, teaming contractors, and/or joint venture partners, you must obtain a similar client authorization letter from each entity.*

Client Authorization Letter (TO BE ACCOMPLISHED BY OFFEROR)
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Dear (Client):

We are currently responding to the Department of the Air Force (AF), Robins Air Force Base (RAFB), Request For Proposal (RFP) F09650-98-R-0207 for the procurement of the West Robins Housing Privatization.

As you know an Offeror's past performance has become an element of increased emphasis in the AF's acquisitions. They are requesting that clients of companies who submit proposals in response to their RFP for the West Robins Housing Privatization Project be contacted, and that their participation in the validation process be requested. We, therefore, respectfully request and hereby authorize you to complete the attached Questionnaire with regards to work we have performed for you, and forward it directly to the Government Point(s) of Contact at the following address:

WR-ALC/PKOS
ATTN: Angela Thompson
215 Byron Street
Robins AFB, GA 31098-1611
Reference: RFP: F09650-98-R-0207

We have identified Mr./Ms. (Name) of your organization as the point of contact based on their knowledge concerning our work. Your cooperation in this matter is appreciated. Any questions may be directed to: [NAME, PHONE NUMBER, FAX NUMBER FOR THE OFFEROR'S POINT OF CONTACT]

Sincerely,

[OFFEROR'S POINT OF CONTACT]